TRANSMITTAL FORM (to be used for all correspondence after initial filing)		<u> </u>		94,645	
				ne 27, 2001	
		First Named Inventor	stantin		
		Art Unit	2622		
		Examiner Name	, CHEUKFAN		
Total Number of	Pages in This Submission		Attorney Docket Number	sla0	310:RtPrc
		ENC	LOSURES (Check all th	at apply	
Amendmin A A Extension Express A Information 1449, and co	ee Attached ent/Reply fter Final ffidavits/declaration(s) n of Time Request Abandonment Request on Disclosure Statement Opies of references e to Missing Parts/ te Application desponse to Missing Parts nder 37 CFR 1.52 or 1.53	Rema		:	After Allowance communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): SEE REMARKS Deer; return repair Coscar/ MAR 1 6 200 Technology Center
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<u> </u>	SIGNAT	URE (OF APPLICANT, ATTOR	NEY, O	R AGENT
Firm or					
Individual name	Karen Dana Oster		· · · · · · · · · · · · · · · · · · ·		
Signature			pty		
Date	March 9, 2004				
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FEE	TRANSMITTAL	
1	for FY 2004	

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

MAR 1 2 2004

(\$)

Co	omplete if Known
Application Number	09/894,645
Filing Date	June 27, 2001
First Named Inventor	Constantin
Examiner Name	LEE, CHEUKFANHEUEIV
Art Unit	2622
Attorney Docket No.	sla0310:RtPrc MAR 1 6 29 4

METHOD OF PAYMENT (check all that apply)			FE	E CALCULATION (continued child	ogy Cent	
X Check Credit card Money Other None	3. ADDITIONAL FEES					
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Deposit Account:	Fee Fee		Fee	Fee Description		
Deposit Account 50-2115	Code (\$)	Code		•	Fee Paid	
Number	1051 130			Surcharge - late filing fee or oath	\vdash	
Deposit Account	1052 50	2052	- 25	Surcharge - late provisional filing fee or cover sheet		
Name The Director is authorized to: (check all that apply)	1053 130	1053	130	Non-English specification	<u> </u>	
Charge fee(s) indicated below Credit any overpayments	1812 2,52	1812	2,520	For filing a request for ex parte reexamination	·	
Charge any additional fee(s) or any underpayment of fee(s)	1804 92	0* 1804	920*	Requesting publication of SIR prior to		
				Examiner action		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805 1,84	1805 דינ	1,840*	Requesting publication of SIR after Examiner action		
	1251 11	2251	55	Extension for reply within first month		
FEE CALCULATION	1252 42		210	Extension for reply within second month		
1. BASIC FILING FEE Large Entity Small Entity	1253 95			Extension for reply within third month		
Fee Fee Fee Fee Description Fee Paid	1254 1,48	2254	740	Extension for reply within fourth month		
Code (\$)	1255 2.01	2255	1.005			
1001 770 2001 385 Utility filing fee	1401 33		•	Notice of Appeal		
1002 340 2002 170 Design filing fee	1402 33			Filing a brief in support of an appeal		
1003 530 2003 265 Plant filing fee	1403 29			Request for oral hearing		
1004 770 2004 385 Reissue filing fee	1451 1,51			Petition to institute a public use proceeding		
1005 160 2005 80 Provisional filing fee	1452 11	1	•	Petition to institute a public use proceeding Petition to revive - unavoidable		
SUBTOTAL (1) (\$) 0		1			\vdash	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,33			Petition to revive - unintentional		
Fee from	1501 1,33			Utility issue fee (or reissue)	\vdash	
Total Claims Extra Claims below Fee Paid Total Claims X = 0	1502 48			Design issue fee		
Independent 311	1503 64			Plant issue fee	\vdash	
Claims -3 =	1460 13			Petitions to the Commissioner	\vdash	
Large Entity & Carell Entity	1807 5			Processing fee under 37 CFR 1.17(q)	\vdash	
Fee Fee Fee Fee Fee Description	1806 18	0 180		Submission of Information Disclosure Stmt		
Code (\$) Code (\$)	8021 4	0 802	1 40	Recording each patent assignment per property (times number of properties)		
1202 18 2202 9 Claims in excess of 20	1809 77	0 280	9 385	Filing a submission after final rejection		
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	4040	, ,,,		(37 CFR 1.129(a))		
	1810 77	0 281	U 385	For each additional invention to be examined (37 CFR 1.129(b))		
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**or number previously paid, if greater; For Reissues, see above	*Reduced	Jy DasiC	rung F	ee Paid SUBTOTAL (3) (\$)	0	

SUBMITTED BY				(Complete (if applicable))		
Name (Print/Type)	Karen Dana Oster	Registration No.	37,621	Telephone	(503) 810-2560	
Signature	Kren (hlas		Date	March 9, 2004	

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